## PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

10657339

| -           |  | CLAIMO                          | 0 60 60                               | <b>7</b> 4 <b>7 7 7</b>               |                  |                  |             |                       |                                     | ,        | ·                   |                        |
|-------------|--|---------------------------------|---------------------------------------|---------------------------------------|------------------|------------------|-------------|-----------------------|-------------------------------------|----------|---------------------|------------------------|
|             |  | CLAIMS                          |                                       |                                       |                  |                  |             | SMALL                 |                                     |          | OTHE                | R THAN                 |
|             | TOTAL CLAIM                                    | (Column 1)                      |                                       | (Column 2)                            |                  | 1                | TYPE        |                       | OF                                  |          | LENTITY             |                        |
| ╟           | <del></del>                                    | -                               |                                       |                                       |                  |                  | RATE        | FEE                   |                                     | RATE     | · FEE               |                        |
| <u>  </u> _ | OR   | NUMBER FILED                    |                                       | NUMBER EXTRA                          |                  |                  | BASIC FE    | E 150.00              | OF                                  | BASIC FE | E 300.00            |                        |
|             | OTAL CHARG                                     | EABLE CLAIMS                    |                                       | .กinus 20=                            |                  |                  |             | X\$.25=               |                                     | ٦        | X\$50=              |                        |
| 11          | IDEPENDENT                                     | minus 3 =                       |                                       | •                                     |                  |                  | <del></del> |                       | OF                                  | `        | <del> </del>        |                        |
| M           | ULTIPLE DEP                                    | ENDENT CLAIM                    | 1 1                                   |                                       | <u> </u>         |                  |             | X100=                 | ļ                                   | OR       | X200=               | <u> </u>               |
| لنكا        | <del></del>                                    |                                 |                                       |                                       |                  |                  |             | +180=                 |                                     | OR       | +360=               |                        |
|             | IT-the differenc                               | ce in column 1 is               | s less than:                          | ess than zero, enter                  |                  | "0" in column 2  |             | TOTAL                 | -                                   | ÓŔ       | TOTAL               |                        |
|             |  | CLAIMS AS                       | AMENDE                                | D - PAR                               | - PART II        |                  |             |                       | ·                                   |          |                     | RTHAN                  |
|             | 7  | (Column 1)                      | ·                                     | (Colun                                |                  | (Column 3)       |             | SMALL                 | ΕΝΠΤΥ                               | OR       |                     | ENTITY                 |
| AMENDMENT A |  | REMAINING<br>AFTER<br>AMENOMENT | -7                                    | PREVIO                                | BER              | PRESENT<br>EXTRA |             | RATE                  | ADDI-<br>TIONAL                     |          | RATE                | ADDI-<br>TIONAL        |
|             | Total  | . 7                             | Minus .                               | ** (7)                                | (7)              | ]=               |             | X\$ 85=               | FEE                                 | 1        | . 3/050             | FEE                    |
|             | Independent                                    | 1.1                             | Minus                                 | *** 2                                 | $\sum_{i=1}^{n}$ | =                |             |                       | <u> </u>                            | OR       | X\$50=              |                        |
|             | FIRST PRESENTATION OF MULTIPLE DEPEND          |                                 |                                       |                                       | CLAIM            |                  |             | X100=                 |                                     | OR       | X200=               | , ,                    |
| 55          |  |                                 |                                       |                                       | +180=            |                  | OF          | +360=                 |                                     |          |                     |                        |
|             |  |                                 |                                       | •                                     |                  | <b>†</b>         | -           | . TOTAL<br>VODIT, FEE |                                     | OFI      | TOTAL<br>ADDIT. FEE |                        |
|             | <del></del>                                    | (Column 1).                     | <del>,</del>                          | (Colum                                |                  | (Column 3)       |             |                       | ,                                   | <b>.</b> |                     |                        |
| AMENDMENT B |  | REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGHE<br>NÚMB<br>PRÉVIOI<br>PAID F    | ER<br>ÚSLY       | PRESENT<br>EXTRA |             | PATE                  | ADDI:<br>TIONAL:<br>FEE             |          | RATE .              | ADDI-<br>TIONAL<br>FEE |
|             | Total  | •                               | Minus                                 | **                                    |                  | =                |             | X\$ 25=               |                                     | OR       | X\$50=              | 1                      |
|             | Independent                                    | *                               | Minus                                 | ***                                   |                  | = .              | -           | X100=                 |                                     | 1 1      |                     | <u> </u>               |
|             | FIRST PRESENTATION OF MULTIPLE DEPE            |                                 |                                       |                                       | CLAIM            |                  | }           |                       | <del></del>                         | OR.      | X200=               |                        |
|             |  |                                 |                                       |                                       |                  |                  |             | +180=                 |                                     | OR       | +360=               |                        |
|             |  |                                 |                                       |                                       |                  | :                | A           | TOTAL<br>ODIT. FEE    |                                     | OR ,     | TOTAL<br>ADDIT, FEE |                        |
|             |  | (Column 1)<br>CLAIMS            | · · · · · · · · · · · · · · · · · · · | (Column                               |                  | (Column 3)       |             |                       |                                     |          |                     | ٠.                     |
|             |  | REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGHER<br>NUMBE<br>PREVIOU<br>PAID FO | R<br>ISLY        | PRESENT<br>EXTRA |             | RATE                  | ADDI-<br>TIONAL<br>FEE <sub>\</sub> |          | RATE                | ADDI-<br>TIONAL        |
|             | Total  | 4                               | Minus                                 | ** .                                  |                  | =                | -           | X\$ 25=               |                                     | 1        | Voca 1              | FEE                    |
|             | Independent                                    |                                 | Minus                                 | ***                                   |                  | =                | -           | <del></del>           |                                     | OR       | X\$50=              |                        |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                 |                                       |                                       |                  |                  | L           | X100=                 |                                     | OR       | X200=               | 1 1 1                  |
|             |  | 1                               |                                       |                                       |                  |                  |             | +180=                 |                                     | OR .     | +360=               |                        |
|             |  |                                 |                                       |                                       |                  | ,                |             |                       |                                     |          |                     |                        |
|             |  |                                 |                                       |                                       |                  |                  |             |                       | •                                   |          |                     |                        |